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APPLICANTS

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** CONTINUING DATA ***** *MS*** FOREIGN APPLICATIONS ***** *MS*

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

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Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged	Examiner's Signature <i>[Signature]</i> Initials	STATE OR COUNTRY CA	SHEETS DRAWING 5	TOTAL CLAIMS 26	INDEPENDENT CLAIMS 1
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ADDRESS

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TITLE

Steerable catheter with reinforced tip

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